

Substitute form 1449A/PTO			Complete if Known		
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)			Application Number	10/525,364	
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			First Named Inventor	Dhar	
			Group Art Unit	1645	
			Examiner Name	S. Devi	
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Examiner Initials*	Cite No.	U.S. Patent Document		Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY
		Number	Kind Code (if known)		
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US Published Applications				
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OTHER NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published	T
/S.D./		Bootland L, Lizama M, Lin W, Saloni K (2002) Oral immunization of salmonids with biodegradable microparticle-based vaccines. In: Harrington K (ed) 4th Intl Symp Aquatic Animal Health, New Orleans, p 228	
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Examiner Signature	/S. Devi/	Date Considered	05/07/2009
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.